

October 26, 2006

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OCT 27 2006

CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

Janis Sigman, Manager
Certificate of Need Program
Department of Health
PO Box 47852
Olympia WA 98504-7852

Dear Ms. Sigma:

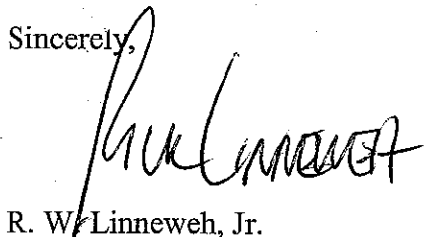
In accordance with WAC 246-310-080, Yakima Valley Memorial Home Care and Hospice Services dba Memorial Hospice hereby submits a letter of intent proposing the establishment of a 20-bed hospice care center to be located in Yakima County.

In conformance with WAC, the following information is provided:

1. A Description of the Extent of Services Proposed: Memorial Hospice proposes to establish a 20-bed hospice care center to provide residential hospice services to area patients and their families.
2. Estimated Cost of the Proposed Project: The estimated capital expenditure associated with this project is not expected to exceed \$7 million.
3. Description of the Service Area: The primary service area will be Yakima County.

Thank you for your interest in this matter. Please feel free to contact me with any questions at 509-575-8001.

Sincerely,



R. W. Linneweh, Jr.

RWL/mnc

